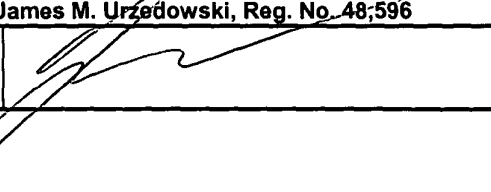



<b>Vidas, Arrett &amp; Steinkraus Utility Patent Application Transmittal</b>		Atty. Docket No		S63.2-10990
		First Inventor		Tracee Eidenschink
		Title:		CATHETER WITH SHEATHED HYPOTUBE
		Express Mail Label No.		EV342628996US
<b>Application Elements</b>		<b>Address To:</b>		Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form <span style="float: right;">Pages 2</span>  <input checked="" type="checkbox"/> Check Included</p> <p>2. <input type="checkbox"/> Applicant claims small entity status</p> <p>3. <input checked="" type="checkbox"/> Specification (including 0 pg cover sheet, 7 pg description, 3 pg claims and 1 pg abstract) <span style="float: right;">Pages 11</span></p> <p>4. <input checked="" type="checkbox"/> Drawings <span style="float: right;">Pages 4</span></p> <p>5. <input checked="" type="checkbox"/> Oath or Declaration <span style="float: right;">Pages 3</span>  a. <input checked="" type="checkbox"/> Newly executed (original or copy)  b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))  (for continuation/divisional with Box 19 completed)  i. <input type="checkbox"/> Deletion of Inventor(s) – signed statement attached deleting inventors named in the prior application <span style="float: right;">Pages</span></p> <p>6. <input checked="" type="checkbox"/> Application Data Sheet <span style="float: right;">Pages 2</span></p> <p>7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet &amp; documents and check) <span style="float: right;">Pages 2</span>  <input type="checkbox"/> Previously recorded on , Reel , Frames</p> <p>8. <input checked="" type="checkbox"/> Power of Attorney <span style="float: right;">Pages 1</span>  <input type="checkbox"/> 37 C.F.R. 3.73(b) Statement (when there is an assignee) <span style="float: right;">Pages</span></p> <p>9. <input type="checkbox"/> English Translation Document <span style="float: right;">Pages</span></p> <p>10. <input type="checkbox"/> Information Disclosure Statement <span style="float: right;">Pages</span>  <input type="checkbox"/> Copies of Citations ( references)</p> <p>11. <input type="checkbox"/> Preliminary Amendment <span style="float: right;">Pages</span></p> <p>12. <input checked="" type="checkbox"/> Return Receipt Postcard <span style="float: right;">Pages 1</span></p> <p>13. <input type="checkbox"/> Certified Copy of Priority Document <span style="float: right;">Pages</span></p> <p>14. <input type="checkbox"/> Nonpublication Request <span style="float: right;">Pages</span></p> <p>15. <input checked="" type="checkbox"/> Constructive Petition <span style="float: right;">Pages 1</span></p> <p>16. <input checked="" type="checkbox"/> Limited Authorization <span style="float: right;">Pages 1</span></p> <p>17. <input checked="" type="checkbox"/> VAS Utility Patent Application Transmittal <span style="float: right;">Pages 1</span></p> <p>18. <input checked="" type="checkbox"/> Other assigner of ownership <span style="float: right;">Pages 2</span></p>				
<p>19. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment or in an Application Data Sheet</p> <p><input type="checkbox"/> Continuation   <input type="checkbox"/> Divisional   <input type="checkbox"/> Continuation-in-part   Of prior application no.</p> <p>Prior Application Information: Examiner                      Group Art Unit</p> <p>For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.</p>				
<p>20. TOTAL NUMBER OF PAGES <span style="float: right;">31</span></p>				
<p><b>21. CORRESPONDENCE ADDRESS</b></p> <p style="font-size: 2em; margin: 20px 0;">490</p>				
<p><b>INSERT CUSTOMER NUMBER LABEL ABOVE</b></p>				
Name		James M. Urzędowski, Reg. No. 48,596		
Signature				Date 9/17/2003

22389 U.S. PTO

10/664132



09/17/03

FEE TRANSMITTAL for FY 2003				Complete if Known			
Patent fees are subject to annual revision.				Application Number		--	
				Filing Date		Concurrently herewith	
				First Named Inventor		Tracee Eidenschink	
				Examiner Name		--	
				Art Unit		--	
<input type="checkbox"/> Applicant claims small entity status. See CFR 1.27				Attorney Docket No.		S63.2-10990	
<b>TOTAL AMOUNT OF PAYMENT</b> (\$ ) 790.00							
METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)			
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input type="checkbox"/> Deposit Account:				<b>3. ADDITIONAL FEES</b>			
Deposit Account Number: 22-0350 Deposit Account Name: Vidas, Arrett & Steinkraus							
The Commissioner is authorized to: (check all that apply) <input type="checkbox"/> Charge the fee(s) indicated below <input type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.							
FEE CALCULATION							
1. BASIC FILING FEE							
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid		
1001	750	2001	375	Utility filing fee	\$750.00		
1002	330	2002	165	Design filing fee	----		
1003	520	2003	260	Plant filing fee	----		
1004	750	2004	375	Reissue filing fee	----		
1005	160	2005	80	Provisional filing fee	----		
SUBTOTAL (1)				(\$ )			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE							
Total Claims		Extra Claims		Fee from below		Fee Paid	
16		-20** =		X		=	
Independent Claims		-3** =		X		=	
2		=		=		=	
Multiple Dependent							
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid		
1202	18	2202	9	Claims in excess of 20	----		
1201	84	2201	42	Independent claims in excess of 3	----		
1203	280	2203	140	Multiple dependent claim, if not paid	----		
1204	84	2204	42	** Reissue independent claims over original patent	----		
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	----		
SUBTOTAL (2)				(\$ )			
** or number previously paid, if greater; For Reissues, see above							
				Other fee (specify):			
				*Reduced by Basic Filing Fee Paid		SUBTOTAL (3) (\$ ) 790.00	
SUBMITTED BY				Complete (if applicable)			
Name (Print/Type)		James M. Urzedowski		Registration No.		48,596	
				(Attorney/Agent)		Telephone 952-563-3000	
Signature				Date		9 / 17 / 2003	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.